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| Fill in this information to identify your case: | | |
|-------------------------------------------------|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | _ | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | rt 1: | Identify Yourself | | |
|-----|---------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|------------------------------------------------------|-----------------------------------------------|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| | your | e the name that is on r government-issued ure identification (for mple, your driver's | Eulalia First name | First name |
| | | nse or passport). | Middle name | Middle name |
| | Bring your picture identification to your meeting with the trustee. | | Orzechowska Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | | other names you have d in the last 8 years | | |
| | | ude your married or den names. | | |
| 3. | you num Indi | y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number | xxx-xx-1502 | |

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Debtor 1 **Eulalia Orzechowska**

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | | I have not used any business name or EINs. Business name(s) | ☐ I have not used any business name or EINs. Business name(s) | | | | |
| | | EINs | EINs | | | | |
| 5. Where you live | | 239 N. Mill Rd., #408A Addison, IL 60101 | If Debtor 2 lives at a different address: | | | | |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | | |
| | | DuPage County | County | | | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | | |
| 6. Why you are choosing this district to file for bankruptcy | | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | | |
| | | | | | | | |

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Case number (if known) Debtor 1 Eulalia Orzechowska

| ar | Tell the Court About | Your B | sankruptcy Ca | ise | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|----------------------------------|------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|--|--|
| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | | |
| | choosing to file under | ■ C | Chapter 7 | | | | | | |
| | | □с | Chapter 11 | | | | | | |
| | | □с | Chapter 12 | | | | | | |
| | | □с | Chapter 13 | | | | | | |
| | | | | | | | | | |
| 3. | How you will pay the fee | | about how yo | u may pay. Ty attorney is sub | pically, if you are paying the fee | eck with the clerk's office in your local court for mo yourself, you may pay with cash, cashier's check, shalf, your attorney may pay with a credit card or o | , or money | | |
| ☐ I need to pay the fee in installments. If you choose this option, sign The Filing Fee in Installments (Official Form 103A). | | | | | | tion, sign and attach the Application for Individual | ls to Pay | | |
| ☐ I request that my fee be waived (You may request this option only if you are filing for Ch | | | | | | | | | |
| | | | applies to you | ur family size a | nd you are unable to pay the fee | our income is less than 150% of the official pove in installments). If you choose this option, you m | | | |
| | | | the <i>Applicatio</i> | on to Have the | Chapter 7 Filing Fee Waived (Of | ficial Form 103B) and file it with your petition. | | | |
|). | Have you filed for bankruptcy within the | ■ No | 0. | | | | | | |
| | last 8 years? | □Y€ | es. | | | | | | |
| | | | District | | When | Case number | | | |
| | | | District | | When | Case number | | | |
| | | | District | | When | Case number | | | |
| | | | | | | | | | |
| 10. | Are any bankruptcy cases pending or being | ■ No | o | | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | □ Ye | ∋ S. | | | | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | | | |
| 11. | Do you rent your residence? | ■ No | o. Go to li | ine 12. | | | | | |
| | | □Y€ | _{es.} Has yo | ur landlord obt | ained an eviction judgment agai | nst you and do you want to stay in your residence | e? | | |
| | | | | No. Go to line | 12. | | | | |
| | | | | Yes. Fill out Ir bankruptcy pe | | n Judgment Against You (Form 101A) and file it w | vith this | | |
| | | | | | | | | | |

Document Page 4 of 55 Case number (if known) Debtor 1 Eulalia Orzechowska Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs

immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs

urgent repairs?

needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Eulalia Orzechowska

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|------------------------------------------------------|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Desc Main Document Page 6 of 55 Case number (if known) Debtor 1 **Eulalia Orzechowska** Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Eulalia Orzechowska

Eulalia Orzechowska Signature of Debtor 1

Executed on February 1, 2017

MM / DD / YYYY

Signature of Debtor 2

MM / DD / YYYY

Executed on

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Debtor 1 Eulalia Orzechowska Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Daniel | J. Podkowa | Date | February 1, 2017 | |
|-----------------|------------------------|---------------|------------------|---|
| Signature of | Attorney for Debtor | | MM / DD / YYYY | |
| Daniel J. P | Podkowa | | | |
| Law Office | e of Daniel J. Podkowa | | | |
| Firm name | | | | _ |
| 1420 Rena | issance Dr. | | | |
| Suite 301- | D | | | |
| Park Ridge | e, IL 60068 | | | |
| Number, Street, | City, State & ZIP Code | | | |
| Contact phone | 1-847-699-7500 | Email address | | |
| 6207945 | | | | |
| Bar number & St | tate | | | |

| | | Docume | ent Page 8 of 55 |
|-----------------------------------------|-------------------------|-------------------|------------------|
| Fill in this infor | mation to identify your | case: | |
| Debtor 1 | Eulalia Orzechow | rska | |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| Spouse if, filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS |
| Case number _ | | | |
| if known) | | | |

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | Summarize Your Assets | | |
|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------|
| | | Your a | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 72,407.50 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 12,584.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 84,991.50 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | iabilities It you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 136,479.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 29,403.00 |
| | Your total liabilities | \$ | 165,882.00 |
| Par | t3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 1,256.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 1,243.00 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other sc | hedules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a | a personal | . family, or |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--------------------------------------------------------------------------------------------------------------|
| | 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. |

245.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following: | Total claim | |
|------------------------------------------------------------------------------------------------------------------------------|-------------|------|
| From Fart 4 on Schedule E/F, copy the following. | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| | Ca | se 17-0318 | / Doc 1 | _ | 02/03/17 ument | Page 10 of 55 | 17 12:05 | 42 De: | SC IV | riain |
|-------|--------------------------------------------------------|--------------------------------------------------------|-----------------------|---------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------|---------------------------|-----------------|---------|--------------------------------------------|
| Fill | in this inforn | nation to identify | your case and th | | | FAUE TO ULDO | | | | |
| | otor 1 | Eulalia Orze | | | | | | | | |
| D 0 k | 7101 1 | First Name | | Name | | Last Name | | | | |
| | otor 2 ouse, if filing) | First Name | Middle | Name | | Last Name | | | | |
| | | | | | 2107.05.11.11 | | | | | |
| Unit | ted States Bar | nkruptcy Court for | the: NORTHER | N DISTI | RICT OF ILLI | NOIS | | | | |
| Cas | se number _ | | | | | _ | | | | Check if this is an amended filing |
| ~ (· | <i></i> | 4004/5 | | | | | | | | |
| | | <u>rm 106A/E</u> | _ | | | | | | | |
| Sc | chedule | e A/B: P | roperty | | | | | | | 12/15 |
| Part | Describe I O you own or h No. Go to Part Yes. Where is | Each Residence, B ave any legal or ec 2. the property? | uilding, Land, or Oti | her Real | Estate You Ow ence, building, is the property Single-family h | | Do not ded | uct secured cla | aims or | exemptions. Put s on <i>Schedule D:</i> |
| | Street address, if available, or other description | | | □ ■ □ | | ti-unit building or cooperative or mobile home | Creditors V | /ho Have Clair | ns Sec | ured by Property. |
| | Addison | IL | 60101-0000 | | Land | | Current va entire prop | | | rent value of the ion you own? |
| | City | State | ZIP Code | | Investment pro | operty | \$6 | 7,322.00 | | \$33,661.00 |
| | | | | □ □ Who | Timeshare Other has an interest Debtor 1 only | in the property? Check one | (such as fe | | | vnership interest y the entireties, or |
| | DuPage | | | | Debtor 2 only | | | | | |
| | County | | | | | Debtor 2 only | ☐ Check | if this is com | munit | y property |
| | | | | 011-01 | | f the debtors and another | • | tructions) | | |
| | | | | | information yearty identification | ou wish to add about this ite on number: | em, such as lo | cai | | |
| | | | | valu | e is recomn | vith non-filing husban nended selling price o e comparable propertion | f \$67,322 b | | | |

Official Form 106A/B Schedule A/B: Property page 1 Case 17-03187 Doc 1 Filed 02/03/17 Entered 02/03/17 12:05:42 Desc Main Document Page 11 of 55 Case number (if known)

| Debt | or 1 E | ulalia Orze | chows | ska | | Julion | Cas | e number (if known) | | |
|------------|--------------------------------|----------------------|--------------|-----------------|-----------------|--------------------------------------|-------------------------------------------------------|---------------------------------------|-------------------------------------------------|-----------------------------------------------------|
| | If you o | wn or have | more | than one, li | | | | | | |
| 1.2 | 444 / - | in Cuasic C | | _ | What | is the propert | y? Check all that apply | | | |
| - | | in Creek Co | | | □ | , | | | | ms or exemptions. Put claims on Schedule D: |
| | Oli eet addre | oos, ii avallable, o | i otiloi de. | sonption | | - | lti-unit building | , | | s Secured by Property. |
| | | | | | | Condominium | or cooperative | | | |
| | | | | | | Manufactured | d or mobile home | O | | 0 |
| | Carol S | tream | IL | 60188-000 | 00 🗆 | Land | | Current value of the entire property? | e | Current value of the portion you own? |
| - | City | | State | ZIP Code | | ☐ Investment property | roperty | \$77,493. | .00 | \$38,746.50 |
| | | | | | | Timeshare | . , | Deceribe the netur | | amarabin interest |
| | | | | | | Other | | | | our ownership interest ncy by the entireties, or |
| | | | | | Who | has an interes | t in the property? Check one | a life estate), if kno | wn. | |
| | | | | | | Debtor 1 only | | Fee simple | | |
| _ | DuPage |) | | | □ | Debtor 2 only | | | | |
| | County | | | | | Debtor 1 and | Debtor 2 only | ☐ Check if this i | s comr | nunity property |
| | | | | | | At least one of | of the debtors and another | (see instructions) | | ,, , |
| | | | | | | r information y erty identificati | ou wish to add about this ite ion number: | em, such as local | | |
| | | | | | | • | daughter's condo. Del | htor did not make | a anv | of the |
| | | | | | | | ghter pays for and has | | | |
| | | | | | | | of Zillow.com's estima | | | |
| | | | | | | | | | | |
| | | | | | | | | Г | | |
| | | | | | | | from Part 1, including any | | | \$72,407.50 |
| | _ ′ | | | rait i. Wille | mat mumbe | 1 11616 | | => | | |
| Part 2 | 2 Descri | be Your Vehic | les | | | | | | | |
| ■ | No Yes | | | | | | | | | |
| 3.1 | Make: | Toyota | | | Who has a | ın interest in th | ne property? Check one | | | ims or exemptions. Put |
| | Model: | Camry | | | ■ Debtor | 1 only | | | I claims on Schedule D: as Secured by Property. | |
| | Year: | 2014 | | | Debtor : | • | | Current value of the | ho | Current value of the |
| | Approxin | mate mileage: | | 30,000 | | 1 and Debtor 2 | only | entire property? | ic | portion you own? |
| | Other inf | formation: | | | ☐ At least | one of the deb | tors and another | | | |
| | | | | | _ | | | ¢40.074 | 00 | £40.074.00 |
| | | | | | | if this is comm tructions) | unity property | \$10,974. | .00 | \$10,974.00 |
| | | | | | (000 11101 | | | | | |
| Exa ■ | a <i>mples:</i> B No Yes | oats, trailers | , motors | s, personal wat | tercraft, fishi | ng vessels, sr | icles, other vehicles, and nowmobiles, motorcycle act | cessories | | |
| .pa | ages you | have attach | ed for I | Part 2. Write t | hat number | | rom Part 2, including any | | | \$10,974.00 |
| Part (| | | | Household Ite | | of the follow | vina itoms? | | | urrent value of the |
| <i>о</i> у | ou own C | or mave any | eyai or | equitable int | erest iii dily | or the follow | ving items : | | | ortion you own? |
| | | | | | | | | | D | o not deduct secured |
| | | | | | | | | | cl | aims or exemptions. |

Official Form 106A/B

| De | ebtor 1 | Eulalia Orze | DOCUMENT Page 12 of 55 echowska Case number (if known |) |
|-----|--------------------|-------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| 6. | <i>Exampl</i> □ No | old goods and | | |
| | | | Debtor's share of misc. goods and furnishings (mostly 20 years old) | \$500.00 |
| 7. | □ No | es: Televisions a | and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Il phones, cameras, media players, games | collections; electronic devices |
| | | | Misc. electronics | \$200.00 |
| 8. | Exampl ■ No | | d figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coi ions, memorabilia, collectibles | n, or baseball card collections; |
| 9. | Exampl | ent for sports a es: Sports, phot musical insti | ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoe | s and kayaks; carpentry tools; |
| 10. | ■ No | | es, shotguns, ammunition, and related equipment | |
| 11. | □ No | | lothes, furs, leather coats, designer wear, shoes, accessories | |
| | | | Clothes | \$200.00 |
| 12. | □ No | | ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, wedding rings, heirloom jewelry, watches, gems, wedding and engagement bands plus misc. inexpensive jewelry | gold, silver \$300.00 |
| | Examp ■ No | rm animals bles: Dogs, cats, | | |
| | ■ No | her personal ar | nd household items you did not already list, including any health aids you did not list formation | |
| 15 | | | of all of your entries from Part 3, including any entries for pages you have attached number here | \$1,200.00 |

Official Form 106A/B Schedule A/B: Property

page 3

Page 13 of 55
Case number (if known) Document Debtor 1 Eulalia Orzechowska Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Yes Cash \$10.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... TCF Bank (fifty percent interest listed) \$200.00 17.1. Checking Harris Bank \$200.00 Savings 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

| | | Case 17-0318 | 57 DUC 1 | Pocument | Page 14 of 55 | Desc Main |
|----|------------------|----------------------------------------------------------------------|------------------------------------|---------------------------|-----------------------------------------------------|------------------------------------------------------------------------------------|
| D | ebtor 1 | Eulalia Orzechow | ska | Document | Case number (if know | n) |
| | | | | | | |
| 25 | . Trusts ■ No | s, equitable or future in | terests in prope | rty (other than anythin | g listed in line 1), and rights or powers e | exercisable for your benefit |
| | | Give specific information | on about them | | | |
| 26 | . Patent | ts, copyrights, tradema | arks, trade secre | ts, and other intellectu | al property | |
| | | ples: Internet domain na | ames, websites, p | roceeds from royalties a | nd licensing agreements | |
| | ■ No □ Yes. | Give specific information | on about them | | | |
| 27 | Licons | ses, franchises, and ot | har ganaral intar | naibles | | |
| 21 | _Exam | | | | n holdings, liquor licenses, professional lice | nses |
| | ■ No | Give specific information | on about them | | | |
| | | · | | | | |
| М | oney or | property owed to you | ? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 00 | T | founds sound to you | | | | |
| 28 | . Tax re ■ No | funds owed to you | | | | |
| | | Give specific information | on about them, inc | luding whether you alre | ady filed the returns and the tax years | |
| | | | | | | |
| 29 | . Family | / support | | | | |
| | | ples: Past due or lump s | sum alimony, spot | usal support, child suppo | ort, maintenance, divorce settlement, prope | rty settlement |
| | ■ No | Give specific information | nn. | | | |
| | — 100. | Cive opeoine informatio | ,,,,,,,, | | | |
| 30 | | amounts someone ow ples: Unpaid wages, dis benefits; unpaid lo | ability insurance p | | efits, sick pay, vacation pay, workers' com | pensation, Social Security |
| | ■ No | | | | | |
| | ☐ Yes. | Give specific information | on | | | |
| 31 | | sts in insurance policion ples: Health, disability, o | | ealth savings account (l | HSA); credit, homeowner's, or renter's insu | rance |
| | ■ No | | | | | |
| | ☐ Yes. | Name the insurance co | ompany of each po Company name: | olicy and list its value. | Beneficiary: | Surrender or refund |
| | | | | | | value: |
| 32 | If you | aterest in property that are the beneficiary of a one has died. | | | d surance policy, or are currently entitled to r | eceive property because |
| | ■ No | | | | | |
| | ☐ Yes. | Give specific information | on | | | |
| 33 | | s against third parties, ples: Accidents, employ | | | t or made a demand for payment to sue | |
| | ■ No | | | | | |
| | ☐ Yes. | Describe each claim | | | | |
| 34 | Other No | contingent and unliqu | idated claims of | every nature, including | g counterclaims of the debtor and rights | to set off claims |
| | _ | Describe each claim | | | | |
| 35 | . Anv fii | nancial assets you did | not already list | | | |
| | ■ No | access you are | | | | |
| | ☐ Yes. | Give specific information | on | | | |

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| Deb | tor 1 | Eulalia Orzechowska | | Case number (if known) | |
|--------------|-----------------------|----------------------------------------------------------------------------------------------------------------------|-----------------------------|------------------------------|-------------|
| 36. | | e dollar value of all of your entries from Part 4, includir t 4. Write that number here | | es you have attached | \$410.00 |
| Part | 5: Des | cribe Any Business-Related Property You Own or Have an Inte | rest In. List any real esta | ate in Part 1. | |
| 87. D | o you o | wn or have any legal or equitable interest in any business-relat | ted property? | | |
| | No. Go t | o Part 6. | | | |
| | Yes. Go | to line 38. | | | |
| Part | | cribe Any Farm- and Commercial Fishing-Related Property You uown or have an interest in farmland, list it in Part 1. | ı Own or Have an Interes | st In. | |
| 16. I | Do you | own or have any legal or equitable interest in any farm | - or commercial fishin | g-related property? | |
| | ■ No. 6 | Go to Part 7. | | | |
| | ☐ Yes. | Go to line 47. | | | |
| Part | 7: | Describe All Property You Own or Have an Interest in That Yo | u Did Not List Above | | |
| | <i>Exampl</i> ■ No | have other property of any kind you did not already list es: Season tickets, country club membership | ? | | |
| | Yes. G | Sive specific information | | | |
| 54. | Add th | e dollar value of all of your entries from Part 7. Write th | nat number here | | \$0.00 |
| Part | 8: | ist the Totals of Each Part of this Form | | | |
| 55. | Part 1: | Total real estate, line 2 | | | \$72,407.50 |
| 56. | Part 2: | Total vehicles, line 5 | \$10,974.00 | | |
| 57. | Part 3: | Total personal and household items, line 15 | \$1,200.00 | | |
| 58. | Part 4: | Total financial assets, line 36 | \$410.00 | | |
| 59. | Part 5: | Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: | Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: | Total other property not listed, line 54 | \$0.00 | | |
| 62. | Total p | personal property. Add lines 56 through 61 | \$12,584.00 | Copy personal property total | \$12,584.00 |

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$84,991.50

| | | Docume | ni Page to oi 55 | |
|-----------------------------------------|-------------------------|-------------------|------------------|-----------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Eulalia Orzechow | /ska | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify | / the Pro | perty You | u Claim a | s Exempt |
|---------|----------|-----------|-----------|-----------|----------|
|---------|----------|-----------|-----------|-----------|----------|

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Schedule A/B that lists this property | portion you own | | | Specific laws that allow exemption |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------|------------------------------------------------------------------------------|------------------------------------|
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| 239 N. Mill Rd., #408A Addison, IL 60101 DuPage County Condo owned with non-filing husband. 50% interest is reflected. Stated value is recommended selling price of \$67,322 based on a 12/29/16 "Analysis of the comparable properties" Line from Schedule A/B: 1.1 | \$33,661.00 | | \$15,000.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-901 |
| 2014 Toyota Camry 30,000 miles Line from Schedule A/B: 3.1 | \$10,974.00 | | \$2,400.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(c) |
| Debtor's share of misc. goods and furnishings (mostly 20 years old) Line from Schedule A/B: 6.1 | \$500.00 | ■ □ | \$500.00 100% of fair market value, up to | 735 ILCS 5/12-1001(b) |
| Misc. electronics | \$200.00 | _ | any applicable statutory limit \$200.00 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 7.1 | | _ | 100% of fair market value, up to any applicable statutory limit | |

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Case number (if known)

| | Zaidila O.Zoolio Ilona | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|------------------------------------------------------------------------|---------|-----------------------------------------------------------------|------------------------------------|--|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the Amount of the exemption you claim portion you own | | | Specific laws that allow exemption | |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | |
| | Clothes Line from Schedule A/B: 11.1 | \$200.00 | | \$200.00 | 735 ILCS 5/12-1001(a) | |
| | Zino nom conceduro / v.z. · · · · · | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Wedding and engagement bands plus misc. inexpensive jewelry | \$300.00 | | \$300.00 | 735 ILCS 5/12-1001(b) | |
| | Line from Schedule A/B: 12.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Cash Line from Schedule A/B: 16.1 | \$10.00 | | \$10.00 | 735 ILCS 5/12-1001(b) | |
| | Line Horr Schedule A.B. 10.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Checking: TCF Bank (fifty percent interest listed) | \$200.00 | | \$200.00 | 735 ILCS 5/12-1001(b) | |
| | Line from Schedule A/B: 17.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Savings: Harris Bank Line from Schedule A/B: 17.2 | \$200.00 | | \$200.00 | 735 ILCS 5/12-1001(b) | |
| | Line Horr Schedule A.B. 11.2 | | | 100% of fair market value, up to any applicable statutory limit | | |
| 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No | | | | | | |
| | Yes. Did you acquire the property cove | red by the exemption wi | ithin 1 | ,215 days before you filed this case | ? | |
| | □ No | • | | • | | |
| | ☐ Yes | | | | | |

| Cas | e 17-03187 | | Entered Page 18 d | 02/03/17 12:0 of 55 | 05:42 Desc IV | iain |
|---------------------------------------------------|----------------------------|---------------------------------------------------------------------------------------------------|----------------------|----------------------------------|-------------------------|--------------------------|
| Fill in this informa | ation to identify you | | AUE 18 | OI J.) | | |
| Debtor 1 | Eulalia Orzecho | weka | | | | |
| Debior 1 | First Name | | ast Name | | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name La | ast Name | | | |
| United States Bank | cruptcy Court for the: | NORTHERN DISTRICT OF ILLING | OIS | | | |
| Case number | | | | | | |
| (if known) | | | | | ☐ Check | if this is an |
| | | | | | ameno | ded filing |
| Official Form | 106D | | | | | |
| Official Form | | | - | | | |
| schedule L |): Creditors | Who Have Claims Se | <u>cured</u> | by Property | <u>/</u> | 12/15 |
| | | f two married people are filing together, l | | | | |
| s needed, copy the <i>I</i> number (if known). | Additional Page, fill it o | out, number the entries, and attach it to the | nis form. On t | the top of any addition | al pages, write your na | me and case |
| . Do any creditors h | ave claims secured by | your property? | | | | |
| ☐ No. Check t | his box and submit th | nis form to the court with your other sch | nedules. You | ı have nothing else to | report on this form. | |
| <u></u> | all of the information b | • | | o o | • | |
| | Secured Claims | | | | | |
| | | | | Column A | Column B | Column C |
| | | nore than one secured claim, list the creditor a particular claim, list the other creditors in | | Amount of claim | Value of collateral | Unsecured |
| | | cal order according to the creditor's name. | | Do not deduct the | that supports this | portion |
| 2.1 Chase Mtg | | Describe the property that secures the | claim: | value of collateral. \$86,950.00 | s77,493.00 | If any \$9,457.00 |
| Creditor's Name | | 114 Klein Creek Ct., Apt. F Care | | | | |
| | | Stream, IL 60188 DuPage Coul | | | | |
| | | 50% interest in daughter's con- | | | | |
| | | Debtor did not make any of the | | | | |
| | | payments. Daughter pays for a has possession of unit. Stated | | | | |
| | | based on 50% of Zillow.com's | value | | | |
| | | estimate. | | | | |
| Po Box 246 | 306 | As of the date you file, the claim is: Che | ck all that | | | |
| Columbus, | | apply. Contingent | | | | |
| | City, State & Zip Code | ☐ Unliquidated | | | | |
| | ,, с ср ссес | ☐ Disputed | | | | |
| Who owes the deb | t? Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | | ☐ An agreement you made (such as mort | tgage or secur | red | | |
| Debtor 2 only | | car loan) | | | | |
| Debtor 1 and Deb | tor 2 only | ☐ Statutory lien (such as tax lien, mechan | nic's lien) | | | |
| ☐ At least one of the | debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| ☐ Check if this clai community debt | | Other (including a right to offset) | | | | |
| | Opened | | | | | |
| | 1/09/06 | | | | | |
| | Last Active | | | | | |

2.2 Jpm Chase

Date debt was incurred 11/09/16

Describe the property that secures the claim:

Last 4 digits of account number

\$36,613.00

9555

\$67,322.00

\$0.00

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| Debtor 1 Eulalia Orzechows | ka | Case number (if know) | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|-------------|------------|
| First Name | liddle Name Last Name | _ | | |
| Creditor's Name | 239 N. Mill Rd., #408A Addison, IL 60101 DuPage County Condo owned with non-filing husband. 50% interest is reflected. Stated value is recommended selling price of \$67,322 based on a 12/29/16 "Analysis of the comparable properties" As of the date you file, the claim is: Check all that | | | |
| Po Box 24696 Columbus, OH 43224 | apply. | | | |
| Number, Street, City, State & Zip Co | ☐ Contingent le ☐ Unliquidated | | | |
| Who owes the debt? Check one. | Disputed Nature of lien. Check all that apply. | | | |
| Debtor 1 only | ☐ An agreement you made (such as mortgage or car loan) | secured | | |
| ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ At least one of the debtors and an | | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) Mortgag | 9 | | |
| Opened 12/05 L Active Date debt was incurred 11/21/10 | ast | 2 | | |
| 2.3 Toyota Motor Credit | Describe the property that secures the claim: | \$12,916.00 | \$10,974.00 | \$1,942.00 |
| Creditor's Name | 2014 Toyota Camry 30,000 miles | | | |
| 111 W 22nd St | As of the date you file, the claim is: Check all that | | | |
| Oakbrook, IL 60521 | apply. Contingent | | | |
| | Contingent | | | |
| Oakbrook, IL 60521 | Contingent | | | |
| Oakbrook, IL 60521 Number, Street, City, State & Zip Co | Contingent Unliquidated Disputed | secured | | |
| Oakbrook, IL 60521 Number, Street, City, State & Zip Co Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | □ Contingent □ Unliquidated □ Disputed Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or car loan) □ Statutory lien (such as tax lien, mechanic's lien) | | | |
| Oakbrook, IL 60521 Number, Street, City, State & Zip Co Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an | Contingent Ide Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or car loan) Statutory lien (such as tax lien, mechanic's lien) other Judgment lien from a lawsuit | | | |
| Oakbrook, IL 60521 Number, Street, City, State & Zip Co Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | □ Contingent □ Unliquidated □ Disputed Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or car loan) □ Statutory lien (such as tax lien, mechanic's lien) | | | |
| Oakbrook, IL 60521 Number, Street, City, State & Zip Co Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an Check if this claim relates to a | □ Contingent □ Unliquidated □ Disputed Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or car loan) □ Statutory lien (such as tax lien, mechanic's lien) other □ Judgment lien from a lawsuit □ Other (including a right to offset) ast | | | |
| Oakbrook, IL 60521 Number, Street, City, State & Zip Co Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an Check if this claim relates to a community debt Opened 12/14 L Active | □ Contingent □ Unliquidated □ Disputed Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or car loan) □ Statutory lien (such as tax lien, mechanic's lien) other □ Judgment lien from a lawsuit □ Other (including a right to offset) ast | | | |
| Oakbrook, IL 60521 Number, Street, City, State & Zip Co Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an Check if this claim relates to a community debt Opened 12/14 L Active Date debt was incurred 11/11/19 | □ Contingent □ Unliquidated □ Disputed Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or car loan) □ Statutory lien (such as tax lien, mechanic's lien) other □ Judgment lien from a lawsuit □ Other (including a right to offset) ast | | | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| | 2000 17 00107 1 | Document | Page 2 | nd 02/00/17 12:00:42 | DC50 Main |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| Fill in this info | ormation to identify your | | | | |
| Debtor 1 | Eulalia Orzechow | ska | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States I | Bankruptcy Court for the: | NORTHERN DISTRICT OF ILL | INOIS | | |
| Case number (if known) | | | | | ☐ Check if this is an amended filing |
| | rm 106E/F E/F: Creditors W | /ho Have Unsecured | Claims | | 12/15 |
| ny executory concentrated by the concentration of t | ontracts or unexpired leases ecutory Contracts and Unexp ditors Who Have Claims Sec | that could result in a claim. Also lisined Leases (Official Form 106G). Dured by Property. If more space is need by Property. If more space is need. If you have no information to rep | st executory o o not include needed, copy t | Part 2 for creditors with NONPRIORI' ontracts on Schedule A/B: Property any creditors with partially secured he Part you need, fill it out, number do not file that Part. On the top of an | (Official Form 106A/B) and on claims that are listed in the entries in the boxes on the |
| | ditors have priority unsecure | | | | |
| No. Go to | | a olamo agamot you. | | | |
| ☐ Yes. | oranz. | | | | |
| | All of Your NONPRIORIT | Y Unsecured Claims | | | |
| ☐ No. You ☐ Yes. 4. List all of younsecured of | our nonpriority unsecured cl | art. Submit this form to the court with y aims in the alphabetical order of the y for each claim. For each claim listed, | creditor who | holds each claim. If a creditor has mype of claim it is. Do not list claims alrethree nonpriority unsecured claims fill | eady included in Part 1. If more |
| | | | | | Total claim |
| | America prity Creditor's Name | Last 4 digits of acco | ount number | 9275 | \$12,936.00 |
| Po Bo | ox 982238 so, TX 79998 | When was the debt | incurred? | Opened 08/05 Last Active 11/03/16 | |
| | r Street City State Zlp Code curred the debt? Check one. | As of the date you f | ile, the claim i | s: Check all that apply | |
| ■ Deb | otor 1 only | ☐ Contingent | | | |
| ☐ Deb | otor 2 only | ☐ Unliquidated | | | |
| ☐ Deb | otor 1 and Debtor 2 only | ☐ Disputed | | | |
| ☐ At le | east one of the debtors and and | | ITY unsecured | I claim: | |
| | eck if this claim is for a com | - | | | |
| debt Is the c | claim subject to offset? | | | ration agreement or divorce that you d | id not |
| ■ No | | ☐ Debts to pension | or profit-sharin | g plans, and other similar debts | |
| ☐ Yes | | Other. Specify | Credit Card | <u> </u> | |
| | | · - | | | |

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Debtor 1 Eulalia Orzechowska Case number (if know) 4.2 \$0.00 Cap1/Best Buy Last 4 digits of account number 8006 Nonpriority Creditor's Name Opened 01/04 Last Active Po Box 5253 When was the debt incurred? 12/19/06 Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account 4.3 Capital One/Carsons Last 4 digits of account number 8222 \$0.00 Nonpriority Creditor's Name Opened 9/29/07 Last Active Po Box 30253 When was the debt incurred? 7/05/12 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.4 Capital One/Menards Last 4 digits of account number 9160 \$0.00 Nonpriority Creditor's Name Opened 02/03 Last Active 26525 N Riverwoods Blvd When was the debt incurred? 9/06/08 Mettawa, IL 60045 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes

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Case number (if know) Debtor 1 Eulalia Orzechowska 4.5 \$9,349.00 **Chase Card** Last 4 digits of account number 4992 Nonpriority Creditor's Name Opened 08/08 Last Active Po Box 15298 When was the debt incurred? 11/13/16 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.6 **Comenity Bank/Carsons** 6125 Last 4 digits of account number \$134.00 Nonpriority Creditor's Name Opened 09/07 Last Active 3100 Easton Square PI When was the debt incurred? 11/13/16 Columbus, OH 43219 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.7 **Discover Fin Svcs Llc** Last 4 digits of account number 2341 \$6.904.00 Nonpriority Creditor's Name Opened 03/10 Last Active Po Box 15316 When was the debt incurred? 11/06/16 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes

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Debtor 1 Eulalia Orzechowska Case number (if know) 4.8 \$2.00 **Dsnb Macys** Last 4 digits of account number 2650 Nonpriority Creditor's Name Opened 02/15 Last Active 9111 Duke Blvd When was the debt incurred? 11/19/16 Mason, OH 45040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Charge Account 4.9 State Farm Fncl Svcs F Last 4 digits of account number 0001 \$0.00 Nonpriority Creditor's Name Opened 08/03 Last Active 3 State Farm Plz When was the debt incurred? 9/17/08 Bloomington, IL 61791 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Automobile 4.1 Syncb/Gap 1164 \$31.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 09/01 Last Active PO Box 965005 When was the debt incurred? 11/25/16 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes

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Debtor 1 Eulalia Orzechowska Case number (if know) 4.1 Syncb/Ikea 1524 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 5/31/10 Last Active Po Box 965005 When was the debt incurred? 9/02/11 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes Syncb/Old Navy 3390 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 02/03 Last Active Po Box 965005 When was the debt incurred? 4/29/04 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account 4.1 Syncb/Old Navy dc 7037 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 9/13/10 Last Active Po Box 965005 When was the debt incurred? 4/22/13 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card

☐ Yes

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| Eulalia Orzechowska | | Case number (if know) | |
|----------------------------------------------------------------------|------------------------------------------------------------|-----------------------------------------------|---------|
| Syncb/Sams Club | Last 4 digits of account number | 3141 | \$0.00 |
| Nonpriority Creditor's Name | _ | Opened 06/02 Last Active | |
| Po Box 965005 Orlando, FL 32896 | When was the debt incurred? | 9/28/02 Last Active | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Charge Acc | count | |
| Syncb/Toys R Us dc | Last 4 digits of account number | 7718 | \$47.00 |
| Nonpriority Creditor's Name | _ | | |
| Po Box 965005 Orlando, FL 32896 | When was the debt incurred? | Opened 05/16 Last Active 11/25/16 | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Credit Card | l | |
| Syncb/tweeter | Last 4 digits of account number | 0803 | \$0.00 |
| Nonpriority Creditor's Name | | | |
| C/o Po Box 965036 Orlando, FL 32896 | When was the debt incurred? | Opened 04/00 Last Active 12/29/05 | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt | | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | a plane and other similar data- | |
| ■ No | Debts to pension or profit-sharin | | |
| ☐ Yes | Other. Specify Charge Acc | count | |

| Debtor 1 | Eulalia O | rzechowska | Document Page 2 | 6 of 5 Case n | umber (if know) | |
|--------------------|----------------------------------------------------------|-------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|------------------|---------------------------------------|-------------------------|
| 4.1 | The Home [| Depot/Cbna | Last 4 digits of account number | 2243 | | \$0.00 |
| | Nonpriority Cred | | | | | · |
| | Po Box 649 Sioux Falls, | | When was the debt incurred? | Oper 7/04/ | ned 10/03/05 Last Active 07 | |
| | Number Street (| City State Zlp Code the debt? Check one. | As of the date you file, the claim | is: Check | all that apply | |
| | Debtor 1 onl | y | ☐ Contingent | | | |
| | ☐ Debtor 2 onl | y | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and | d Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one | of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| | | s claim is for a community | ☐ Student loans | | | |
| | debt | bject to offset? | Obligations arising out of a separeport as priority claims | aration ag | reement or divorce that you did not | |
| | No | | Debts to pension or profit-sharing | ng plans, a | and other similar debts | |
| | ☐ Yes | | ■ Other. Specify Charge Acc | | | |
| 4.1 | Unvl/Citi | | Last 4 digits of account number | 4705 | | \$0.00 |
| | Nonpriority Cred | ditor's Name | | | | |
| | Po Box 624 Sioux Falls, | | When was the debt incurred? | 5/21/ | ned 12/98 Last Active 07 | |
| | Number Street (| City State ZIp Code | As of the date you file, the claim | | | |
| , | Who incurred t | the debt? Check one. | | | | |
| | Debtor 1 onl | у | ☐ Contingent | | | |
| | Debtor 2 onl | у | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and | d Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one | of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| | | s claim is for a community | ☐ Student loans | | | |
| | debt | bject to offset? | Obligations arising out of a separeport as priority claims | aration ag | reement or divorce that you did not | |
| | ■ No | | ☐ Debts to pension or profit-sharing | ng plans, a | and other similar debts | |
| | ☐ Yes | | Other. Specify Credit Card | t | | |
| Part 3: | List Others | s to Be Notified About a Debt | That You Already Listed | | | |
| is tryin have m | s page only if y ig to collect fro nore than one c | you have others to be notified abom you for a debt you owe to som | out your bankruptcy, for a debt that y eone else, list the original creditor ir ou listed in Parts 1 or 2, list the addi | Parts 1 | or 2, then list the collection agency | here. Similarly, if you |
| Part 4: | Add the Ar | mounts for Each Type of Uns | ecured Claim | | | |
| | he amounts of unsecured cla | | s. This information is for statistical r | eporting | purposes only. 28 U.S.C. §159. Add | I the amounts for each |
| | | | | | Total Claim | |
| | 6a. otal ims | Domestic support obligations | | 6a. | \$0.00 | |
| from Pa | | Taxes and certain other debts y | ou owe the government | 6b. | \$ 0.00 | |
| | 6c. | Claims for death or personal in | jury while you were intoxicated | 6c. | \$ 0.00 | |
| | 6d. | Other. Add all other priority unsec | cured claims. Write that amount here. | 6d. | \$ 0.00 | |
| | 6e. | Total Priority. Add lines 6a throu | gh 6d. | 6e. | \$ | |
| | C.f | Student leans | | C.f | Total Claim | · |
| To | 6f. otal | Student loans | | 6f. | \$ | |

Official Form 106 E/F

claims

from Part 2

6g.

\$

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

0.00

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Debtor 1 Eulalia Orzechowska

6i.

| 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
|-----|-----------------------------------------------------------------------------------|-----|-----------------|
| 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 29,403.00 |
| 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 29,403.00 |

Official Form 106 E/F

| | | DOCUME | <u> </u> | |
|---------------------|--------------------------|-------------------|-------------|------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Eulalia Orzechow | /ska | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this amended fili |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | r company with Name, Number | h whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------------------------|-------------------------------------------------------|-------------------|-----------------------------------------|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.3 | • | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.4 | • | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | | | | | |

| | | Docume | nt Page 29 o | <u>f 55 </u> |
|--------------------------------|-----------------------------------------------------------------------------------|--------------------------------|---------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Fill in this | information to identify your | case: | | |
| Debtor 1 | Eulalia Orzechov | vska | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing | ng) First Name | Middle Name | Last Name | |
| | | | | |
| United Stat | tes Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case numb | ber | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| Official | l Form 106H | | | |
| | | labtana | | |
| Sched | lule H: Your Cod | eptors | | 12/15 |
| ■ No | you have any codebtors? (If | you are filing a joint case, o | do not list either spouse | as a codebtor. |
| ☐ Yes | 3 | | | |
| Arizon | hin the last 8 years, have yo a, California, Idaho, Louisiana Go to line 3. | | | y? (Community property states and territories include ngton, and Wisconsin.) |
| ☐ Yes | s. Did your spouse, former spo | use, or legal equivalent live | with you at the time? | |
| in line Form | 2 again as a codebtor only | if that person is a guaran | tor or cosigner. Make s | if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 6G). Use Schedule D, Schedule E/F, or Schedule G to fil |
| | Column 1: Your codebtor Name, Number, Street, City, State and 2 | IP Code | | Column 2: The creditor to whom you owe the debt Check all schedules that apply: |
| | | | | onesit air consumos mat appriji |
| 3.1 | Name | | | Schedule D, line |
| ' | Name | | | ☐ Schedule E/F, line |
| | | | | ☐ Schedule G, line |
| | Number Street | State | ZIP Code | - |
| | City | State | ZIF Code | |
| 3.2 | | | | ☐ Schedule D, line |
| | Name | | | ☐ Schedule B/F, line |
| | | | | ☐ Schedule G, line |
| - | Number Street | | | |
| | City | State | ZIP Code | |

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| Fill | in this information to identify your c | ase: | | | | | | | |
|----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|--------------------------------------------|---------------------|----------------|------------------------------------------|-------------------------|---------------------------------|-------|
| Del | btor 1 Eulalia Orze | chowska | | | | | | | |
| | btor 2 puse, if filing) | | | | _ | | | | |
| Uni | ited States Bankruptcy Court for the | : NORTHERN DISTRIC | CT OF ILLINOIS | | | | | | |
| (If kr | se number fficial Form 106l | | - | | | | ed filing | estpetition chaptiving date: | ter |
| | chedule I: Your Inc | | | | | MM / DD/ Y | YYY | | 12/15 |
| Be a sup spo atta | as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. The separate Employment | sible. If two married pec are married and not fili ir spouse is not filing w | ng jointly, and your ith you, do not inclu | spouse ide infor | is liv mati | ring with you, incl on about your spo | ude information | on about your space is neede | ed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor 2 | 2 or non-filing | spouse | |
| | If you have more than one job, | | ☐ Employed | | | | ☐ Employed | | |
| | attach a separate page with information about additional | Employment status | ■ Not employed | ot employed | | | ■ Not employed | | |
| | employers. | Occupation | retired | | | retired | non-filing hւ | usband | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | | | | | | | |
| | | How long employed t | here? | | | | | | |
| Pai | rt 2: Give Details About Mor | nthly Income | | | | | | | |
| Esti spo | mate monthly income as of the duse unless you are separated. | ate you file this form. If | you have nothing to r | eport for | any | line, write \$0 in the | space. Include | e your non-filing | j |
| If yo | ou or your non-filing spouse have more space, attach a separate sheet to | ore than one employer, co | ombine the informatio | on for all e | empl | oyers for that perso | on on the lines | below. If you ne | eed |
| | | | | | | For Debtor 1 | For Debtor non-filing s | | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 0.00 | \$ | 0.00 | |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | 0.00 | +\$ | 0.00 | |

0.00

0.00

Calculate gross Income. Add line 2 + line 3.

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| Deb | tor 1 | Eulalia Orzechowska | - | Cas | e number (if kno | wn) | | | | |
|-----|---------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-------|------------------|---------------|-----------|------------|---------|------------------|
| | | | | | | | | | | |
| | | | | Fo | or Debtor 1 | | | Debtor | | |
| | Conv | y line 4 here | 4. | \$ | 0 | 00 | \$ | n-filing s | 0.00 | |
| | oop. | y line 4 nere | •• | Ψ. | 0. | - | Ψ_ | | 0.00 | _ |
| 5. | List | all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | . \$ | 0. | 00 | \$ | | 0.00 | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | . \$ | 0. | 00 | \$ | | 0.00 | _ |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 0. | 00 | \$ | | 0.00 | _ |
| | 5d. | Required repayments of retirement fund loans | 5d. | | 0. | 00 | \$ | | 0.00 | _ |
| | 5e. | Insurance | 5e. | | | 00 | \$ | | 0.00 | _ |
| | 5f. | Domestic support obligations | 5f. | | | 00 | \$_ | | 0.00 | _ |
| | 5g. | Union dues | 5g. | - | | 00 | \$_ | | 0.00 | _ |
| | 5h. | Other deductions. Specify: | _ 5h. | | | 00 | | | 0.00 | _ |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 0. | 00 | \$_ | | 0.00 | _ |
| 7. | Calc | rulate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 0. | 00 | \$_ | | 0.00 | _ |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, | | | | | | | | |
| | | profession, or farm Attach a statement for each property and business showing gross | | | | | | | | |
| | | receipts, ordinary and necessary business expenses, and the total | | | | | | | | |
| | | monthly net income. | 8a. | . \$ | 0. | 00 | \$ | | 0.00 | |
| | 8b. | Interest and dividends | 8b. | . \$ | 0. | 00 | \$ | | 0.00 | _ |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive | | | | | | | | |
| | | Include alimony, spousal support, child support, maintenance, divorce | 0.0 | ¢ | • | ^^ | ¢ | | 0.00 | |
| | 8d. | settlement, and property settlement. Unemployment compensation | 8c. 8d. | | | 00 | \$_ \$ | | 0.00 | _ |
| | 8e. | Social Security | 8e. | | 278. | | \$ | | 733.00 | _ |
| | 8f. | Other government assistance that you regularly receive | 00. | . Ψ | 270. | 00 | Ψ | | 7 33.00 | _ |
| | | Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental | ; | | | | | | | |
| | | Nutrition Assistance Program) or housing subsidies. | | | | | | | | |
| | | Specify: Link Card (\$225 paid to debtor and spouse) | 8f. | \$ | 122. | 50 | \$ | | 122.50 | |
| | 8g. | Pension or retirement income | 8g. | . \$ | 0. | 00 | \$ | | 0.00 | _ |
| | 8h. | Other monthly income. Specify: | 8h. | .+ \$ | 0. | 00 | + \$_ | | 0.00 | _ |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$_ | 400. | 50 | \$_ | | 855.5 | 0 |
| | | | Г | | | $\overline{}$ | | 1 | | <u> </u> |
| 10. | | • | 10. | \$ | 400.50 | ⊦ \$_ | { | 855.50 | = \$ _ | 1,256.00 |
| | Add | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | L | | | | | | | |
| 11. | Inclu othe | e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your r friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not | depe | | | | | Schedule | J. | |
| | Spec | cify: | | | | | | 11. | +\$ | 0.00 |
| 12. | Write | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certains | | | | | | . 12. | \$ | 1,256.00 |
| | appli | | | | | | | | · — | · |
| | | | | | | | | | Combi | ned ly income |
| 13. | Do y | ou expect an increase or decrease within the year after you file this form | ? | | | | | | | , |
| | | No. | | | | | | | | |
| | | Vas Evolain: | | | | | | | | |

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| Fill | in this information to identify your case: | | | | | |
|------------|---------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|-----------------|-------------------------------------------------------------|-------------------------------|
| Deb | otor 1 Eulalia Orzechowska | | | Chec | ck if this is: | |
| | otor 2 ouse, if filing) | | | | An amended filing A supplement show 13 expenses as of | ving postpetition chapter |
| `' | ted States Bankruptcy Court for the: NORTHEF | RN DISTRICT OF ILL INC | ois | - | MM / DD / YYYY | |
| | se number | THE PROPERTY OF THE PROPERTY O | | | | |
| | enumber enown) | | | | | |
| Of | fficial Form 106J | | | | | |
| | chedule J: Your Expens | | | | | 12/1 |
| info | as complete and accurate as possible. If ormation. If more space is needed, attach mber (if known). Answer every question. | | | | | |
| Par | t 1: Describe Your Household Is this a joint case? | | | | | |
| ١. | No. Go to line 2. | | | | | |
| | ☐ Yes. Does Debtor 2 live in a separate | household? | | | | |
| | ☐ No ☐ Yes. Debtor 2 must file Official I | Form 106J-2, <i>Expenses</i> | for Separate House | ehold of Deb | tor 2. | |
| 2. | Do you have dependents? ■ No | | | | | |
| | | ill out this information for ach dependent | Dependent's relati | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | | □ No |
| | dependents names. | | | | | □ Yes □ No |
| | | | | | | ☐ Yes |
| | | | | | | □ No |
| | | | | | | ☐ Yes |
| | | | | | | □ No □ Yes |
| 3. | Do your expenses include ■ No | 0 | - | | | □ res |
| | expenses of people other than yourself and your dependents? | - | | | | |
| Est exp | t 2: Estimate Your Ongoing Monthly E timate your expenses as of your bankrupt penses as of a date after the bankruptcy is plicable date. | tcy filing date unless ye | | | | |
| the | lude expenses paid for with non-cash go value of such assistance and have inclu- ficial Form 106l.) | | | | Your exp | enses |
| 4. | The rental or home ownership expense payments and any rent for the ground or lo | | nclude first mortgage | e 4. \$ | S | 97.00 |
| | If not included in line 4: | | | | | |
| | 4a. Real estate taxes | | | 4a. \$ | 5 | 0.00 |
| | 4b. Property, homeowner's, or renter's i | | | 4b. \$ | S | 0.00 |
| | 4c. Home maintenance, repair, and upk | | | 4c. \$ | | 0.00 |
| 5. | Homeowner's association or condor Additional mortgage payments for your | | ne equity loops | 4d. \$ 5. \$ | | 240.00 0.00 |
| J. | Additional mortgage payments for your | residence, Such as 101 | ne euuliv 10al 15 | J. J | , | v.uu |

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| Deb | otor 1 | Eulalia C | Orzechowska | Case nur | mber (if known |) |
|-------------|---------|---------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------|------------------|----------------------------------|
| 6. | Utiliti | ies: | | | | |
| ٥. | 6a. | | , heat, natural gas | 6a | . \$ | 40.00 |
| | 6b. | | wer, garbage collection | 6b | . \$ | 0.00 |
| | 6c. | | e, cell phone, Internet, satellite, and cable services | 6c | . \$ | 101.00 |
| | 6d. | Other. Spe | ecify: | 6d | . \$ | 0.00 |
| 7. | Food | and hous | ekeeping supplies | 7 | . \$ | 270.00 |
| 8. | | | children's education costs | 8 | . \$ | 0.00 |
| 9. | Cloth | ning, laund | ry, and dry cleaning | 9 | . \$ | 15.00 |
| 10. | | • | products and services | 10 | . \$ | 0.00 |
| | | - | ntal expenses | 11 | . \$ | 10.00 |
| | | | Include gas, maintenance, bus or train fare. | | · —— | |
| | | | ar payments. | | . \$ | 50.00 |
| 13. | Enter | rtainment, | clubs, recreation, newspapers, magazines, and books | 13 | . \$ | 0.00 |
| 14. | Chari | itable cont | ributions and religious donations | 14 | . \$ | 0.00 |
| 15. | Insur | rance. | | | | |
| | | | nsurance deducted from your pay or included in lines 4 or 20. | | | |
| | | Life insura | | 15a | * | 0.00 |
| | 15b. | Health ins | urance | 15b | . \$ | 0.00 |
| | 15c. | Vehicle in: | surance | 15c | . \$ | 70.00 |
| | 15d. | Other insu | ırance. Specify: | 15d | . \$ | 0.00 |
| 16. | | | nclude taxes deducted from your pay or included in lines 4 or | | | |
| | Speci | , | | 16 | . \$ | 0.00 |
| 17. | | | ease payments: | | _ | |
| | | | ents for Vehicle 1 | 17a | | 350.00 |
| | | | ents for Vehicle 2 | 17b | | 0.00 |
| | | Other. Spe | | 17c | · · | 0.00 |
| | | Other. Spe | | 17d | . \$ | 0.00 |
| 18. | | | of alimony, maintenance, and support that you did not re | | . \$ | 0.00 |
| 10 | | | your pay on line 5, <i>Schedule I, Your Income</i> (Official Forr s you make to support others who do not live with you. | n 1061). | . \$ | |
| 19. | | | s you make to support others who do not live with you. | 10 | · | 0.00 |
| 20 | Speci | · | erty expenses not included in lines 4 or 5 of this form or | 19 | | |
| 20. | | | s on other property | 20a | | 0.00 |
| | | Real estat | | 20b | | 0.00 |
| | | | homeowner's, or renter's insurance | 20b | | 0.00 |
| | | | nce, repair, and upkeep expenses | 20d | | |
| | | | er's association or condominium dues | 20d 20e | | 0.00 |
| 04 | | | er's association of condominium dues | | · · — | 0.00 |
| 21. | Otne | r: Specify: | | | +\$ | 0.00 |
| 22. | Calcu | ulate your | monthly expenses | | | |
| | | | through 21. | | \$ | 1,243.00 |
| | | | 2 (monthly expenses for Debtor 2), if any, from Official Form | 106J-2 | \$ | , |
| | | | a and 22b. The result is your monthly expenses. | | \$ | 1,243.00 |
| | 220.7 | rtaa iirio 22 | a and 225. The recall to your monthly expended. | | | 1,243.00 |
| 23. | | - | monthly net income. | | | |
| | | , , | 12 (your combined monthly income) from Schedule I. | 23a | | 1,256.00 |
| | 23b. | Copy your | monthly expenses from line 22c above. | 23b | \$ | 1,243.00 |
| | | | | | | |
| | 23c. | | our monthly expenses from your monthly income. | 00- | • | 13.00 |
| | | The result | is your monthly net income. | 23c | . \$ | 13.00 |
| 24 | De | 011 0V 2004 : | on ingresses or degrees in your expenses within the con- | ofter very file 4l- | io form? | |
| ∠4 . | | | an increase or decrease in your expenses within the year ou expect to finish paying for your car loan within the year or do you e | | | ocrease or decrease because of a |
| | | | terms of your mortgage? | Apool your mongage | , paymont to III | ioreade of accrease because of a |
| | ■ No | | | | | |
| | Пу | | Explain here: | | | |

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| Fill in this in | nformation to identify your | case: | | |
|---------------------------------|------------------------------|--------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|
| Debtor 1 | Eulalia Orzechow | rska | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) |) First Name | Middle Name | Last Name | |
| United State | es Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case numbe | er | | | ☐ Check if this is an amended filing |
| | form 106Dec | | | |
| <u>Declar</u> | ration About a | <u>ın Individual</u> | Debtor's Schedules | 12/15 |
| You must file | e this form whenever you fi | ile bankruptcy schedules | onsible for supplying correct information. s or amended schedules. Making a false stat kruptcy case can result in fines up to \$250,00 | |
| | Sign Below | | | |

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

| ■ No |
|------|
|------|

Yes. Name of person
Attach Bankruptcy Petition Preparer's Notice,
Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

| (| /s/ Eulalia Orzechowska |
|---|-------------------------|
| | Eulalia Orzechowska |
| | Signature of Debtor 1 |

Signature of Debtor 2

Date February 1, 2017

Date

Official Form 106Dec

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| Case r | r 2 if, filing) States Bar number | First Name First Vame Akruptcy Court for the: | Middle Name Middle Name | Last Name | | |
|---------------------------------|--------------------------------------------|------------------------------------------------|-----------------------------|-------------------------------------------------------------------------------------------|------------------------------|------------------------------------|
| (Spouse United Case r (if known | if, filing) States Bar number | First Name | | | | |
| (Spouse United Case r (if known | if, filing) States Bar number | | Middle Name | Last Nama | I | |
| Case r | number | kruptcy Court for the: | | Last Name | | |
| (if known | | | NORTHERN DISTRIC | T OF ILLINOIS | | |
| Offic | | | | | | Check if this is an amended filing |
| State Be as c | ement complete a | nd accurate as possi | ble. If two married peopl | riduals Filing for e are filing together, both a to this form. On the top of a | re equally responsible for s | |
| Part 1 | | , | rital Status and Where Y | ou Lived Before | | |
| | | | | ou Liveu Belole | | |
| 1. W | hat is your | current marital statu | s? | | | |
| | Married | | | | | |
| | Not mar | ried | | | | |
| 2. Du | uring the la | st 3 years, have you | lived anywhere other tha | an where you live now? | | |
| _ | l Na | | | | | |
| | l No l Yes List | all of the places you li | ved in the last 3 years. Do | o not include where you live n | OW. | |
| _ | | | · | · | | Datas Daktas 0 |
| ט | eptor 1 Pri | or Address: | Dates Debtor lived there | Debtor 2 Prior | Address: | Dates Debtor 2 lived there |
| | and territorio | es include Arizona, Cal | | legal equivalent in a common Nevada, New Mexico, Puerto (Official Form 106H). | | |
| Part 2 | Explair | n the Sources of You | r Income | | | |
| | • | | | | | |
| Fil | II in the tota | I amount of income you | u received from all jobs an | ting a business during this all businesses, including parties together, list it only once | art-time activities. | alendar years? |
| = | No Yes. Fill | in the details. | | | | |
| | | | | | | |
| | | | Debtor 1 | | Debtor 2 | |

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Debtor 1 Eulalia Orzechowska Document Page 36 of 55
Case number (if known)

| 5. | Did you receive any | other income of | during this year | or the two pr | evious calendar years? |
|----|---------------------|-----------------|------------------|---------------|------------------------|
|----|---------------------|-----------------|------------------|---------------|------------------------|

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

☐ No

Yes. Fill in the details.

| | Debtor 1 | | Debtor 2 | | |
|-------------------------------------------------------------------------|------------------------------------------------------------------|---------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------------|--|
| | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) | |
| From January 1 of current year until the date you filed for bankruptcy: | Social Security retirement benefits | \$556.00 | | | |
| | Debtor's half of Link Card (split with non-filing husband) | \$245.00 | | | |
| For last calendar year: (January 1 to December 31, 2016) | Social Security retirement benefits | \$3,336.00 | | | |
| | Debtor's half of Link Card | \$1,470.00 | | | |
| For the calendar year before that: (January 1 to December 31, 2015) | Social Security retirement benefits | \$3,336.00 | | | |
| | Debtor's half of Link Card | \$1,470.00 | | | |

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

| _ | A 141 | D - I. 4 41- | D - I: (01 - | delica and an estimate | | 1-1-1-0 |
|----|------------|--------------|---------------|------------------------|----------|---------|
| О. | Are either | Deptor 1 S | or Deptor 2 S | debts primarily | consumer | uepts : |

□ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

□ No. Go to line 7.

Uses List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address

Dates of payment

Total amount you paid

Still owe

Was this payment for ...

^{*} Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

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ase number (*if known*) Debtor 1 Eulalia Orzechowska Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Reason for this payment Dates of payment **Total amount** Amount you still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο П Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Describe the Property Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

Official Form 107

per person

Address:

Describe the gifts

Value

Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600

Person to Whom You Gave the Gift and

Dates you gave the gifts Case 17-03187 Doc 1 Filed 02/03/17 Entered 02/03/17 12:05:42 Desc Main

| Deb | etor 1 Eulalia Orzechowska | Document | Page 38 of 55 Case numbe | r (if known) | |
|------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------|---------------------------|
| 14. | Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift or or the second of the s | | fts or contributions with a tol | tal value of more than | \$600 to any charity? |
| | Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo | total Describe what y | ou contributed | Dates you contributed | Value |
| Part | t 6: List Certain Losses | | | | |
| 15. | Within 1 year before you filed for bankro or gambling? No | uptcy or since you filed for | bankruptcy, did you lose any | ything because of thef | t, fire, other disaster |
| | ☐ Yes. Fill in the details. | | | | |
| | Describe the property you lost and how the loss occurred | | coverage for the loss surance has paid. List pending 3 of Schedule A/B: Property. | Date of your loss | Value of property lost |
| Part | 17: List Certain Payments or Transfer | | , , | | |
| | Include any attorneys, bankruptcy petition No Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not | Description and transferred | value of any property | Date payment or transfer was made | Amount of payment |
| | Law Office of Daniel J. Podkowa 1420 Renaissance Dr. Suite 301-D Park Ridge, IL 60068 | Attorney Fees | | Commenced 12/12/16 | \$1,500.00 |
| 17. | Within 1 year before you filed for bankru promised to help you deal with your cre Do not include any payment or transfer tha | editors or to make paymen | | or transfer any prope | rty to anyone who |
| | ■ No | | | | |
| | Yes. Fill in the details. | | | | |
| | Person Who Was Paid Address | Description and transferred | value of any property | Date payment or transfer was made | Amount of payment |
| | Within 2 years before you filed for bank transferred in the ordinary course of yo Include both outright transfers and transfer include gifts and transfers that you have al No Yes. Fill in the details. | ur business or financial af rs made as security (such as | fairs? the granting of a security interest | | |

Address

Description and value of

property transferred

Person Who Received Transfer

Person's relationship to you

Date transfer was

made

Describe any property or

paid in exchange

payments received or debts

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Debtor 1 **Eulalia Orzechowska**

| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No | | | | | | | | |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|---------------------------------------|-------------|---------------------------------------------------------------|--------|-----------------------------------------------|--|
| | | Yes. Fill in the details. | | | | | | ate Transfer was | |
| | Name of trust Description and value of the property transferred | | | | | | | | |
| Pai | t 8: | List of Certain Financial Accounts, Ins | struments, Safe Deposi | t Boxes, and St | torage Unit | ts | | | |
| 20. | sol | | oenefit, closed, ons, brokerage | | | | | | |
| | | Yes. Fill in the details. | | | | | | | |
| | | nme of Financial Institution and Idress (Number, Street, City, State and ZIP de) | Last 4 digits of account number | Type of account or instrument | | Date account was closed, sold, moved, or transferred | | Last balance pefore closing or transfer | |
| 21. | | you now have, or did you have within 1 yoh, or other valuables? | ear before you filed for | ^r bankruptcy, a | ny safe der | posit box or other depo | sitory | for securities, | |
| | | Yes. Fill in the details. | | | | | | | |
| | | nme of Financial Institution Idress (Number, Street, City, State and ZIP Code) | | Address (Number, Street, City, | | cribe the contents | | Do you still have it? | |
| 22. | Hav | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? | | | | | | | |
| | | No | | | | | | | |
| | | Yes. Fill in the details. | | | | | | | |
| | | nme of Storage Facility Idress (Number, Street, City, State and ZIP Code) | to it? | to it? Address (Number, Street, City, | | ibe the contents | | Do you still have it? | |
| Pai | t 9: | Identify Property You Hold or Control f | for Someone Else | | | | | | |
| 23. | | you hold or control any property that son someone. | meone else owns? Incl | ude any proper | ty you bori | rowed from, are storing | for, c | or hold in trust | |
| | | No Yes. Fill in the details. | | | | | | | |
| | _ | vner's Name Idress (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, S Code) | | Describe | the property | | Value | |
| Pai | t 10 | Give Details About Environmental Info | ormation | | | | | | |
| or | the | purpose of Part 10, the following definitio | ons apply: | | | | | | |
| | tox | vironmental law means any federal, state, ic substances, wastes, or material into thulations controlling the cleanup of these | e air, land, soil, surfac | e water, ground | | | | | |

to own, operate, or utilize it, including disposal sites.

Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Eulalia Orzechowska

| 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? | | | | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|-------------------------------------|------------------------------------------------------------------------|--|--|--|--|--|
| | No | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | | | |
| 25. | Have you notified any governmental unit of any | release of hazardous material? | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | | | |
| 26. | Have you been a party in any judicial or admini | strative proceeding under any envir | onmental law? Include settlements a | and orders. | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | | | | | |
| Par | 11: Give Details About Your Business or Cor | nnections to Any Business | | | | | | | |
| 27. | Within 4 years before you filed for bankruptcy, | did you own a business or have any | of the following connections to any | business? | | | | | |
| | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | | | |
| | ☐ A partner in a partnership | | | | | | | | |
| | ☐ An officer, director, or managing executive of a corporation | | | | | | | | |
| | ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | | | | | |
| | No. None of the above applies. Go to Part | 12. | | | | | | | |
| | Yes. Check all that apply above and fill in t | the details below for each business. | | | | | | | |
| | Business Name De Address | escribe the nature of the business | Employer Identification number | | | | | | |
| | | | | Do not include Social Security number or ITIN. Dates business existed | | | | | |
| 28. | Within 2 years before you filed for bankruptcy, institutions, creditors, or other parties. | did you give a financial statement to | o anyone about your business? Inclu | ıde all financial | | | | | |
| | ■ No □ Yes. Fill in the details below. | | | | | | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | | | | | | | | |
| | | | | | | | | | |

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Case number (if known) Document

Debtor 1 Eulalia Orzechowska

| | ent of Financial Affairs and any attachments, and I declar | |
|----------------------------------------------|---------------------------------------------------------------------------------------------------------------------|---------------------------------|
| | naking a false statement, concealing property, or obtainies up to \$250,000, or imprisonment for up to 20 years, or | |
| /s/ Eulalia Orzechowska | | |
| Eulalia Orzechowska Signature of Debtor 1 | Signature of Debtor 2 | |
| Date February 1, 2017 | Date | |
| Did you attach additional pages to Your | Statement of Financial Affairs for Individuals Filing for | Bankruptcy (Official Form 107)? |
| ■ No | | |
| ☐ Yes | | |
| Did you pay or agree to pay someone w | ho is not an attorney to help you fill out bankruptcy form | ns? |
| ■ No | | |

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Fill in this inforn | nation to identify your case: | | |
|----------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|------------------------------------------------------------|
| Debtor 1 | Eulalia Orzechowska | | |
| Debtor 2 | First Name Middle N | lame Last Name | |
| (Spouse if, filing) | First Name Middle N | lame Last Name | - |
| United States Bar | nkruptcy Court for the: NORTHERI | N DISTRICT OF ILLINOIS | |
| Case number | | | _ |
| (if known) | | _ | Check if this is an amended filing |
| If you are an indi | | | pter 7 12/15 |
| ■ you have lease You must file this | ed personal property and the lease s form with the court within 30 days wer is earlier, unless the court exter | | |
| | ople are filing together in a joint card date the form. | se, both are equally responsible for supplying corr | ect information. Both debtors must |
| write yo | and accurate as possible. If more spour name and case number (if know | , | a. On the top of any additional pages, |
| 1. For any credito | ors that you listed in Part 1 of Scheo | dule D: Creditors Who Have Claims Secured by Pro | perty (Official Form 106D), fill in the |
| information be Identify the cre | iow. ditor and the property that is collatera | What do you intend to do with the property secures a debt? | y that Did you claim the property as exempt on Schedule C? |
| One disease • • | | | _ |
| Creditor's C | hase Mtg | ☐ Surrender the property.☐ Retain the property and redeem it. | □ No |
| Described as of | 444141.5 0 . 1 0 . 4 . 50 | ☐ Retain the property and enter into a | Yes |
| Description of property | 114 Klein Creek Ct., Apt. F Ca Stream, IL 60188 DuPage | Reaffirmation Agreement. Retain the property and [explain]: | |
| securing debt: | County 50% interest in daughter's condo. Debtor did not make a of the payments. Daughter pa | ny ys | |
| | for and has possession of uni Stated value based on 50% of Zillow.com's estimate. | | |
| Creditor's J p | om Chase | ☐ Surrender the property. ☐ Retain the property and redeem it. | □ No |
| Description of | 239 N. Mill Rd., #408A Addison IL 60101 DuPage County Condo owned with non-filing husband. 50% interest is reflected. Stated value is recommended selling price of | Retain the property and enter into a Reaffirmation Agreement. | ■ Yes |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| Debt | tor 1 Eula | ilia Orzechowska | Case number (if known) | |
|--------|--------------------------------|----------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|
| | operty ecuring debt | \$67,322 based on a 12/29/16 "Analysis of the comparable properties" | ☐ Retain the property and [explain]: | _ |
| | reditor's T ame: | oyota Motor Credit | ☐ Surrender the property. ☐ Retain the property and redeem it. | □ No |
| pr | escription of operty | 2014 Toyota Camry 30,000 miles | ■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]: | ■ Yes |
| in the | ny unexpire e information | on below. Do not list real estate leases. Ur | in Schedule G: Executory Contracts and Unexpired leases are leases that are still in effect; the the trustee does not assume it. 11 U.S.C. § 365(p)(2) | lease period has not yet ended. |
| Des | cribe your ι | unexpired personal property leases | | Will the lease be assumed? |
| | or's name: | ased | | □ No |
| | erty: | | | ☐ Yes |
| | sor's name: | | | □ No |
| | cription of lea erty: | ased | | ☐ Yes |
| Less | or's name: | | | □ No |
| | cription of lea erty: | ased | | ☐ Yes |
| Less | sor's name: | | | □ No |
| Desc | cription of lea perty: | ased | | _ |
| · | · | | | ☐ Yes |
| Desc | sor's name: cription of lea | ased | | □ No |
| Prop | erty: | | | ☐ Yes |
| | or's name: | ased | | □ No |
| | erty: | | | ☐ Yes |
| | sor's name: | | | □ No |
| | cription of lea erty: | ased | | ☐ Yes |
| Part | 3: Sign E | Below | | |
| Unde | er penalty of | | y intention about any property of my estate that sec | cures a debt and any personal |
| X | /s/ Eulalia | Orzechowska | x | |
| | Eulalia Or Signature o | rzechowska f Debtor 1 | Signature of Debtor 2 | |
| | | February 1, 2017 | Date | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Eulalia Orzechowska Case number (if known)

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-03187 Doc 1 Filed 02/03/17 Entered 02/03/17 12:05:42 Desc Main Document Page 49 of 55

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In re Eu | lalia Orzech | owsk | Ka | | Cas | e No. | | |
|-------------------|------------------|------------------|------------------------------------------------------------------------------------------------------------------|-----------------------------|----------------------------------------|---------|----------------------|--------------------|
| | | | | Debtor(s) | Cha | pter | 7 | |
| | DISC | CLC | SURE OF COMPE | NSATION OF AT | TORNEY FO | R DI | EBTOR(S) | |
| compen | sation paid to | me w | 9(a) and Fed. Bankr. P. 2016 ithin one year before the filing debtor(s) in contemplation | ng of the petition in banks | ruptcy, or agreed to b | e paid | to me, for service | |
| Fo | r legal services | s, I ha | we agreed to accept | | \$ | | 1,500.00 | |
| | | | is statement I have received | | | | 1,500.00 | |
| | | | | | | | 0.00 | |
| 2. The sou | rce of the com | pensa | ation paid to me was: | | | | | |
| | Debtor | | Other (specify): | | | | | |
| 3. The sou | rce of compen | satio | n to be paid to me is: | | | | | |
| • | Debtor | | Other (specify): | | | | | |
| 4. I I ha | ve not agreed | to sha | are the above-disclosed comp | pensation with any other p | person unless they are | e mem | bers and associate | es of my law firm. |
| | | | he above-disclosed compens together with a list of the na | | | | | ny law firm. A |
| 5. In retur | n for the above | e-disc | closed fee, I have agreed to re | ender legal service for all | aspects of the bankro | uptcy c | case, including: | |
| b. Prep c. Rep | aration and fil | ing of the de | financial situation, and render f any petition, schedules, state bettor at the meeting of credited ded] | ement of affairs and plan | which may be requi | red; | - | ankruptcy; |
| 6. By agre | Representa | ation | or(s), the above-disclosed fe of the debtors in any dis sary proceeding. | | | idanc | es, relief from s | stay actions or |
| | | | | CERTIFICATION | | | | |
| | that the foreg | | is a complete statement of an | y agreement or arrangem | ent for payment to m | e for r | epresentation of the | he debtor(s) in |
| Februar | y 1, 2017 | | | /s/ Daniel J. | Podkowa | | | |
| Date | • | | | Daniel J. Po | | | | |
| | | | | Signature of A | A <i>ttorney</i> of Daniel J. Podko | owa | | |
| | | | | 1420 Renais | | , wa | | |
| | | | | Suite 301-D | | | | |
| | | | | Park Ridge, 1-847-699-7 | | | | |
| | | | | Name of law j | | | | |

AGREEMENT

| This agreement made and entered into on |
|-------------------------------------------------------------------------------------------------------------------|
| a) Analysis of the financial situation and rendering advice and assistance to Client(s) in determining whether to |
| file a petition under Title 11, U.S.C. |
| (b) Preparation and filing of the petition, schedules statement of affairs and other documents required by the |
| Court. |

CLIENT(S) UNDERSTAND THAT IT IS CLIENT(S) DITY TO BE CERTAIN ALL ASSETS AND ALL DEBTS ARE DISCLOSED AND LISTED. THERE ARE NO EXCEPTIONS! THE PENALTY FOR MAKING A FALSE STATEMENT OR CONCEALING PROPERTY IS A FINE OF UP TO \$500,000 OR IMPRISONMENT FOR UP TO 5 YEARS OR BOTH. 18 U.S.C. SS 152 AND 3571.

(c) Representation of Client(s) at the meeting of creditors.

Client(s) agree to furnish Attorney with all requested information relevant to the bankruptcy in a timely manner not to exceed twenty-one (21) days from the date of the request. Client(s) understand that certain listed debts may not be dischargeable and may survive the bankruptcy in whole or in part. Debts which are not discharged in Chapter 7 including but are not limited to, most taxes, child support, alimony, student loans, courtordered fines or restitutions, debts obtained through fraud of deception, recent debts, most governmental loans, traffic and parking tickets, intentional wrongdoing, criminal acts, and personal injury debts caused by driving while intoxicated or under drugs. Co-debtors are not protected by the Chapter 7 Bankruptcy unless they also file for bankruptcy. ALL DEBTS MUST BE LISTED, EVEN THOSE WHICH ARE NOT DISCHARGEABLE. fees, to be paid according the attached schedule, and before the case is filed. Missed appointment fees are \$25.00 per occurrence. Whether it is Client(s) fault that a check bounces is not a consideration in determining a bounced check fee of \$25.00. Personal checks are not acceptable after such an occurrence. In addition to Attorney's fees, debtor is responsible for two debt counseling sessions -- one before the filing and one after the filing and the filing fee, which is paid prior to filing. The first counseling payment is to be in the form of a money order of \$10.00, to be made to Chestnut Credit Counseling. Client(s) are free to use other agencies, if they so desire, but the prices of such agencies may be different and likely higher. Please note that Chestnut Credit Counseling may raise their fee at any time and that Client(s) are responsible for any such increase. The Credit Report can be obtained by Client(s) for free or Attorney will request one if Client(s) pay \$23.00 per person or \$43.00 per couple in the form of a Money Order to C.I.N. (also subject to increases which Client(s) are responsible for). Client(s) hereby give Attorney permission to obtain credit reports and/or background checks. The filing fee is currently \$335.00 in the form of a Money Order made out to Daniel J. Podkowa. The fee may increase with little or no notice and Client(s) are responsible for any increases. The last fee is for the Financial Management course which currently is available for at or around \$10.00 to \$35.00 per bankruptcy, depending on which agency is chosen. Client(s) are responsible for any of their possible increases.

Collateral (item(s) which creditors have a lien on) generally survive a bankruptcy. You can usually elect to reaffirm debts, but those debts must then be paid back according to the reaffirmation agreement and you are liable for the balance no matter what the circumstances are. Attorney fully reserves to option to refuse to sign a reaffirmation agreement if he believes that a reaffirmation is not in the best interest of the Client(s) or for any other reason.

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Client(s) agree to pay Attorney \$100.00 plus court costs for any post filing amendment to the bankruptcy petition or schedules resulting from Client(s) error or omission. Client(s) agree pay Attorney \$100.00 for obtaining a continuance (second hearing date) to the first meeting of creditors. Attorney accepts said services on terms and conditions herein stated. After a minimum of \$100.00 is received, Client(s) may start referring creditors to Attorney and are advised to do so.

Attorney and Client(s) agree that any prepayment of fees is immediate compensation for Attorney's commitment to perform future services and that the funds are the property of Attorney and may be deposited in Attorney's operating, business, or personal account(s).

If Client(s) stop or delay more than fourteen (14) days beyond days beyond the schedule in paying Attorney fees, delay more than twenty-one (21) days in obtaining requested information relevant to the bankruptcy, or are in any ways uncooperative, or decide not To file (or circumstances make such filing unreasonable) for Chapter 7 Bankruptcy, Attorney may close Client(s)'s file and keep all of Client(s)'s money for work done to date. Most work is done during the initial states. Generally, MONEY PAID IS NON-RETURNABLE!

If Client(s) are more than one week late with any payments, Client(s) give Attorney permission to inform any creditor who calls that there is a serious problem with the filing of the bankruptcy and Attorney has not been fully retained, without any additional notice to Client(s). Any work not specifically mentioned in this agreement, including but not limited to, contested matters, fraud objections, audits, discovery, or any other services before or after discharge, are subject to additional fees and costs are not included as part of agreed upon employment of Attorney.

If any clause, phrase, provision, or portion of this agreement or attached schedules or the application thereof to any person or circumstances shall be invalid. or enforceable under applicable law, such event shall not affect, impair, or render invalid, or unenforceable the remainder of this agreement or attached schedule nor any other clause, phrase provision, or portion hereof, nor shall it affect the application of any clause, revision, portion hereof to any person or circumstances. This agreement and attached schedule cannot be altered amended modified, nor added to unless the alteration, amendment, modification, or addition is in writing and signed or initialed by all parties to be bound by the changes.

This written agreement and the he attached schedule of payments are complete and no additional promises or agreements have been made. The schedule of payments is incorporated into this agreement.

CLIENT(S) AGREE TO FURNISH ATTORNEY WITH ANY CHANGE IN ADDRESSES OR TELEPHONE NUMBERS AND TO CONTACT ATTORNEY IMMEDIATELY IN EVENT OF PHONE DISCONNECTION FOR AT LEAST THE NEXT THREE (3) YEARS. This agreement replaces any prior bankruptcy agreement between the parties.

Client(s) and Attorney have read the agreement and agree to be bound by its terms.

Client(s) Attorney: Attorney:

We are a debt relief agency. We help people file for bankruptcy relief under the Bankruptcy Code.



SCHEDULE OF PAYMENTS

| Attorney fees (pa | yable to Daniel J. Poo | dkowa): | | | | |
|----------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|-------------------------------------|
| 1 | | | | \$ | <u> 330.00</u> | |
| 2. 🐠 | - 23 -201 | 7 | | \$ | /70 .00 | |
| 3. <u> </u> | 4 4 | <u> </u> | | | 500.00 | |
| 4 | 1 | _ | | | | |
| 5. | 2017 | | | \$ | ,00 | |
| 6. | 12 mars - 12 mar | The state of the s | | | .00 | |
| 7. | | The state of the s | The first of the same of the first of the fi | Ś | .00 | |
| 8. | and the second second | | | The state of the s | | |
| | | | | Total \$_ | <u> </u> | |
| Other fees and or | | e without notice) to be paid befo Money Order payable to C.I.N. Money Order payable to Chestr Money Order payable to Danie | \$23.00 for an individual or nut Credit Counseling \$10 | 0.00 | | |
| per bankruptcy a manner for the o second counselin | and is additional to the debts to be discharge g session (Financial M 180 days. If the bankr | or the second counseling session (ne above fees and costs (price do d. Polish translation (if needed) lanagement Course) are not inclu- cuptcy is not filed before then, a | epends on which agency is is included to the point of ded, and are for additional | used). It must filing. Transla charge, if need | be completed and filed in ition for the 341 meeting, ded. The first counseling co | a timely , and the ertificate |
| Late fees are \$15 | .00 per week, starting | g from the court fee date up to \$1 | .50.00 maximum. | | | |
| Signed and dated | on the same date as | the agreement attached hereto. | | 1 | | <i>a</i> |
| Client(s) | Edolia S | inello du | Attome <u>v</u> . | 1 consu | J. Joth | 7 |

United States Bankruptcy Court Northern District of Illinois

| In re | Eulalia Orzechowska | | Case No. | |
|-------|----------------------------------------------|-----------------------------------------------------------------|----------------|---------------------------|
| | | Debtor(s) | Chapter | 7 |
| | VERIFICATION OF CREDITOR MATRIX | | | |
| | | Number of Creditors: 21 | | |
| | The above-named Debtor(s) h (our) knowledge. | hereby verifies that the list of credito | rs is true and | correct to the best of my |
| Date: | February 1, 2017 | /s/ Eulalia Orzechowska Eulalia Orzechowska Signature of Debtor | | |

BankAmerica Po Box 982238 El Paso, TX 79998

Cap1/Best Buy Po Box 5253 Carol Stream, IL 60197

Capital One/Carsons Po Box 30253 Salt Lake City, UT 84130

Capital One/Menards 26525 N Riverwoods Blvd Mettawa, IL 60045

Chase Card Po Box 15298 Wilmington, DE 19850

Chase Mtg Po Box 24696 Columbus, OH 43224

Comenity Bank/Carsons 3100 Easton Square Pl Columbus, OH 43219

Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850

Dsnb Macys 9111 Duke Blvd Mason, OH 45040

Jpm Chase Po Box 24696 Columbus, OH 43224

State Farm Fncl Svcs F 3 State Farm Plz Bloomington, IL 61791 Syncb/Gap PO Box 965005 Orlando, FL 32896

Syncb/Ikea Po Box 965005 Orlando, FL 32896

Syncb/Old Navy Po Box 965005 Orlando, FL 32896

Syncb/Old Navy dc Po Box 965005 Orlando, FL 32896

Syncb/Sams Club Po Box 965005 Orlando, FL 32896

Syncb/Toys R Us dc Po Box 965005 Orlando, FL 32896

Syncb/tweeter C/o Po Box 965036 Orlando, FL 32896

The Home Depot/Cbna Po Box 6497 Sioux Falls, SD 57117

Toyota Motor Credit 111 W 22nd St Oakbrook, IL 60521

Unvl/Citi Po Box 6241 Sioux Falls, SD 57117